

Volunteer Application

Please fill out accurately and as completely as possible.										
APPLICANT INFORMATION										
Last Name				First Name		M.I.	SS #			
Street Address							1	1		
Town/City					State Zip code					
Home Number				Email						
Mobile Number				Emergency Contact			Phone Number			
Position Applied for				E. Contact Address			Relationship			
Are you at least 18 years of age?			YES 🔲	NO 🔲	Have you ever volunteered for us past?	YES	NO 🔲			
			YES	NO 🔲	If so, when?					
Have you been convicted of a crime (other then minor traffic violations) in the last 5 years? YES NO If yes, please explain on separate piece of paper Please note that a conviction is not an automatic disqualifier for a position. Willfull omission or falsification is, however, reasonable grounds for ineligibility.										
How many total hours per week are you seeking? Are you willing to work: Saturdays Sundays Holidays Evenings										
Please check shift that you are most willing to work: $\ \square \ 9:30-1:30 \ \square \ 1:30-5:30 \ \square \ 5:30-7:30$ PM (IF POSSIBLE) $\ \square \ A$ Vailable for all										
EDUCATION										
High School				Address						
Dates Attended	To Degree/Cert		gree/Certifica	te:	Special Courses:					
College/ University				Address						
Dates Attended	То	Deg	gree/Certificat	te:	Special Courses:					
Other School/Program				Address						
Dates Attended	70 Degree/Certificat			te:	Special Courses:					
SKILLS										
Please select the characteristics that most suit you: Strong communication skills Have customer service skills Have computer skills or cashier experience Enjoy working with people Prefer hands-on work Prefer office orientated work I am am not comfortable handling raw fish or other raw feed Do you have experience (check all that apply) in: Teaching Maintenance Web/Graphic Design Office work Artistic work Aquarium or Animal science Have you had any experience with public speaking? Please explain? Foreign language (speak, read and/or write) skills: English Spanish French Sign language Other: Do you have any certifications, class work or other training that will help you in this position?										
Are you CPR/FIRST aid certified? YES NO EXPIRATION DATE (While preferred, this is not required of volunteers)										

FRE V.	IOOS E	VIFLO	INICI	NI & VULUN	ILLE	AFERIENC	L (You can	attach a resume in	illeu or in support of this section)
1 Compa	ny					Phone Number	()		
Address						Supervisor			
Position	Starting Salary						Final Salary		
Responsibilities:				1		Hours per week			
From		То		Reason for Leaving					
May we contact your previous supervisor for a reference? YES					YES 🔲	NO 🔲	If not, why?		
2 Company					ı	Phone Number	()		
Address						Supervisor			
Job Title	Job Title Starting Salary				Starting Salary			Final Salary	
Responsib	sponsibilities:					Hours per week			
From		То		Reason for Leaving					
May we c	ontact your	previous	superviso	or for a reference?	YES 🔲	NO 🔲	If not, why?		
ESSAY	YS & QU	JESTI	ONS:						
		A) T	ell us a	bout yourself. W	hat activit	ies, interests a	nd hobbies ar	e you intereste	ed/participate in?
									_
				B) Why do	you think	you are a goo	d match for t	he aquarium?	
							,		
				C) If accepted	, what do	you hope to ga	ain most from	the opportunit	ty?
				ATURE					
By signing	g this form,	I underst	and that	I am					
- Agreeing that all information on this application is true to the best of my knowledge and that if at any time a portion is found to be false I forfeit my application, and if already chosen, I understand it will be grounds for dismissal.									
-	- Agreeing to be interviewed by an appropriate representative of the Aquarium, but that I have the right to decide to continue with my service or not								
-	- Expected to complete all training								
- Expected to volunteer a minimum of 4 hours per week, or two full shifts (8 hours) a month, but understand this is flexible based on my availability									
- Understand the nature of the position I am supplying this information for and can perform my expected duties with or without reasonable accommodation									
-	- Agreeing to follow all MSA guidelines and policies throughout my service time								
-	- Aware that MSA has the right to release me from my service at any time, with or without cause, just as I have the right to withdraw from the program at any time.								

Please submit your completed application to :

Maine State Aquarium ATTN: Aimee Hayden-Roderiques RE: Volunteer Application PO BOX 8 West Boothbay Harbor, ME 04575

Signature

If you have any further questions, please contact:

Date

Aimee Hayden-Roderiques
Natural Science Educator
Department of Marine Resources- Education Division
(207) 633-9542
<u>Aimee.Hayden-Roderiques@maine.qov</u>